IAA Number			- 0000 -	
	GT&C	#	Order #	Amendment/Mod #

	DEPARTMENT AND/OR AGENCY							
1.	Requesting Agency of Products/Services Servicing Agency Providing Products/Services							
	Name	Office of the Vice President	General Services Administration Office of Governmentwide Policy					
	Address 725 17th Street, NW Washington, DC 20503 1800 F Street, NW Washington, DC 20405							
2. Servio	eing Agency	Agreement Tracking Number (Optional)						
3. Assist	ed Acquisit	ion Agreement Yes No 🗸						
	 4. GT&C Action (Check action being taken) ✓ New ☐ Amendment — Complete only the GT&C blocks being changed and explain the changes being made. 							
	Cancellation – Provide a brief explanation for the IAA cancellation and complete the effective End Date.							
5. Agree	ment Perio		30-2019 of IAA or effective cancellation date					
6. Recur Yes \to \to \to	Other Renewal State the other renewal period:							
7. Agreement Type (Check One) Single Order IAA Multiple Order IAA								
If Yes is	8. Are Advance Payments Allowed for this IAA (Check One) Yes No If Yes is checked, enter Requesting Agency's Statutory Authority Title and Citation							
Note: Spe	ecific advance	ee amounts will be captured on each related Order.						

IAA Number				- 0000 -		
	GT&C	#	1	Order #	Amendment/Mod #	

9. Estimated Agreement Amount (The Servicing Agency completes all information for the estimated agreement amount.)							
(Optional for Assisted Acquisitions)							
Direct Cost \$359,000.00 Overhead Fees & Charges \$0.00 Total Estimated Amount \$359,000.00							
10 CTATUTODY AUTHORITY							
a. Requesting Agency's Authority (Check One) Franchise Revolving Working Economy Act Other Fund Fund Capital Fund (31 U.S.C. 1535/FAR 17.5) Authority							
Fill in Statutory Authority Title and Citation for Franchise Fund, Revolving Fund, Working Capital Fund, or Other Authority							
b. Servicing Agency's Authority (Check One) Franchise Revolving Working Economy Act Other Fund Fund Capital Fund (31 U.S.C. 1535/FAR 17.5) Authority Fill in Statutory Authority Title and Citation for Franchise Fund, Revolving Fund, Working Capital Fund, or Other Authority							
11. Requesting Agency's Scope (State and/or list attachments that support Requesting Agency's Scope.) To the extent permitted by law, and subject to the availability of appropriations, the General Services Administration, the Office of Government-wide Policy shall provide the Commission with such administrative services, funds, facilities, staff, equipment, and other support services as may be necessary to carry out its mission on a reimbursable basis.							
12. Roles & Responsibilities for the Requesting Agency and Servicing Agency (State and/or list attachments for the roles and responsibilities for the Requesting Agency and the Servicing Agency.) Insofar as the Federal Advisory Committee Act, as amended (5 U.S.C. App.) (the "Act"), may apply to the Commission, any functions of the President under that Act, except for those in section 6 of the Act, shall be performed by the Administrator of General Services.							

GT&C # Order # Amendment/Mod #
13. Restrictions (Optional) (State and/or attach unique requirements and/or mission specific restrictions specific to this IAA). The Commission shall terminate within 30 days after it presents its final report to the President, consistent with the Presidential Executive Order on the Establishment of Presidential Advisory Commission on Election Integrity of May 11, 2017.
14. Assisted Acquisition Small Business Credit Clause (The Servicing Agency will allocate the socio-economic credit to the Requesting Agency for any contract actions it has executed on behalf of the Requesting Agency.)
15. Disputes: Disputes related to this IAA shall be resolved in accordance with instructions provided in the Treasury Financial Manual (TFM) Volume I, Part 2, Chapter 4700, Appendix 10; Intragovernmental Business Rules.
16. Termination (Insert the number of days that this IAA may be terminated by written notice by either the Requesting or Servicing Agency.)
30 If this agreement is canceled, any implementing contract/order may also be canceled. If the IAA is terminated, the agencies shall agree to the terms of the termination, including costs attributable to each party and the disposition of awarded and pending actions.
If the Servicing Agency incurs costs due to the Requesting Agency's failure to give the requisite notice of its intent to terminate the IAA, the Requesting Agency shall pay any actual costs incurred by the Servicing Agency as a result of the delay in notification, provided such costs are directly attributable to the failure to give notice.
17. Assisted Acquisition Agreements – Requesting Agency's Organizations Authorized To Request Acquisition Assistance for this IAA. (State or attach a list of Requesting Agency's organizations authorized to request acquisition assistance for this IAA.) NA
18. Assisted Acquisition Agreements – Servicing Agency's Organizations authorized to Provide Acquisition Assistance for this IAA. (State or attach a list of Servicing Agency's organizations authorized to provide acquisition for this IAA.) NA
19. Requesting Agency Clause(s) (Optional) (State and/or attach any additional Requesting Agency clauses.)

IAA Number		- 0000 -	
(GT&C #	Order # Amendment/Mo	od#
20. Servicing A N/A	gency Clause(s) (Optional) (State and/or atta	ch any additional Servicing Agency clauses.)
		y and/or Servicing Agency g Agency attachments.)	Attachments (Optional) (State and/or attach any additional
22. Annual Rev	iew of IAA		
			the IAA if the agreement period exceeds one year. Appropriate ification to any affected Order(s).
to sign this agree	ment. Each Agenc	evel accepting authority or	CY OFFICIAL official as designated by the Requesting Agency and Servicing Agency the general terms and conditions are properly defined, including the fulfilled per the agreement.
The Agreement P	Period Start Date (I	Block 5) must be the same a	as or later than the signature dates.
Actual work for t for Blocks 37 and	his IAA may NOT 138.	begin until an Order has be	een signed by the appropriate individuals, as stated in the Instructions
23.	Requesting Ag	ency	Servicing Agency
Name	Katherine Puri		Allison Brigati
Title	Director of Adı	ninistration	Associate Administrator, OGP
Telephone Number(s)	(b)(6)		
Fax Number			
Email Address	(b) (6)		allison.brigati@gsa.gov
SIGNATURE	(b)(6)		(b) (6)
Approval Date	07-13-2017		7/13/2017
	,		

United States Government Interagency Agreement (IAA) – Agreement Between Federal Agencies Order Requirements and Funding Information (Order) Section

IAA Number SPEIT/C001XXX			Servici	ng Agency's Agreement				
GT&C #	Order# An	nendment/Mod	l# Tracki	ng Number (Optional)				
P	RIMARY ORGA	NIZATION/C	OFFICE INF	ORMATION				
24.	Requ	y	Servicing A	gency				
Primary Organization/Office Name	Office of the Vi	ce President		General Services Admir Office of Governmentwi				
Responsible Organization/Office Address	725 17th Stree Washington, D			1800 F Street, NW Washington, DC 20405	5			
	ORDER/REQ	QUIREMENT	S INFORMA	TION				
New Modification (Mod) – List affected Order blocks being changed and explains the changes being made. For Example: for a performance period mod, state new performance period for this Order in Block 27. Fill out the Funding Modification Summary by Line (Block 26) if the mod involves adding, deleting or changing Funding for an Order Line. Cancellation − Provide a brief explanation for Order cancellation and fill in the Performance Period End Date for the effective cancellation date.								
26. Funding Modification Summary by Line	Line #	Line #	Line # _	Total of All Other Lines (attach funding details)	Total			
Original Line Funding	\$	\$	\$	\$	\$0.00			
Cumulative Funding Changes From Prior Mods [addition (+) or reduction (-)]	s	\$	\$	s	\$0.00			
Funding Change for This Mod	\$	\$	\$	\$	\$0.00			
TOTAL Modified Obligation	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00			
Total Advance Amount (-)	\$	\$	\$	s	\$0.00			
Net Modified Amount Due	\$0.00	\$0.00	\$0.00	\$ 0.00	\$0.00			
27. Performance Period Start Date Last Signature End Date 09-30-2017 For a performance period mod, insert the start and end dates that reflect the new performance period.								

ER.2017.099

IAA Number SPEI17C001XXX - Order # - Amendment/Mod # Servicing Agency's Agreement Tracking Number (Optional)																
28. Order Line/Funding Information									Line	Numbe	r					
Requesting Agency Funding Information							ng		Ser	vicing	Agency	Fundin	g Info	rmation	l	
ALC									47-	-00-00	16					
Component SP ATA AID		BPOA	EPOA	A	MAIN	SUB	SP	ATA	AID	BPOA	E POA	A	MAIN	SUB		
TAS Required by 10/1/2014			011	2016	2017		0037	000			047	2016	2017		4540	000
OR Current T	'AS fo	ormat							47-4540.16/17							
BETC			DIS	В					COL	L						
Object Class	Code	(Optional)														
BPN 031649358								0574	12317	5						
BPN + 4 (Opt	tional))														
Additional Ad Classification (Optional)			(b) (4)											
Requesting A 09-30-20 MM-DD-YY	17	Funding	g Expi	ration D	ate			0	Requesting Agency Funding Cancellation Date 09-30-2022 MM-DD-YYYY							
Project Num			he Pre	esident	ial Advi	sory	Comm					ity				
Description of products/servi Support activities of May 11, 2017	ices, i s consi	ncluding istent with	the bo	ona fide esidentia	need for	this e Or	Order.) der on the	e Establi	shment	of Pres						
North Americ						IAIC	(S) Nun					C 4 .	1.4	,.	¥. ,	7 4
Breakdown of Unit of Meas			DIE LII	ie Cost	S				OR Breakdown of Assisted Acquisition Line Cost: Contract Cost \$							ost:
Quantity	die	Unit l	Drice	Т	T	otal			vicing		S					
1		\$215,0		\$ 2-	15,000.0					Total	\$ 0.	.00				
Overhead Fee	s & C	harges		\$ 0.	00			_	Advan		\$					
Total Line Ar	nount	Obligate	ed	\$ 2	15,000.	00			Li	ne (-)						
								Ne	t Tota	l Cost	\$ 0.	.00				
								Ass	sisted	Acquis	ition S	ervicing	Fees Ex	plana	tion	
Advance	Line	Amount	(-)	\$ 0.	.00											
Net Lin	e Am	ount Du	e	\$ 2	15,000.0	00										
Type of Serv	ice R	equirem	ents													
☐ Severa	able S	ervice		Non-se	everable	Serv	vice	✓ Not	Appli	icable						

IAA Number SPEI17C001XXX	Servicing Agency's Agreement
GT&C # Order # Amendment/Mod #	Tracking Number (Optional)
20 1 PL 100 CL 1	
29. Advance Information (Complete Block 29 if the Advance Payment	t for Products/Services was checked "Yes" on the G1&C.)
Total Advance Amount for the Order \$[All	Order Line advance amounts (Block 28) must sum to this total.]
Revenue Recognition Methodology (according to SFFAS 7) (Identify account for the Requesting Agency's expense and the Servicing Agency	
Straight-line – Provide amount to be accrued \$	and Number of Months
Accrual Per Work Completed – Identify the accounting posting per	riod:
☐ Monthly per work completed & invoiced	
Other – Explain other regular period (bimonthly, quarterly, e	etc.) for posting accruals and how the accrual
amounts will be communicated if other than billed.	
30. Total Net Order Amount: \$ 215,000.00	
[All Order Line Net Amounts Due for reimbursable agreements and Net	t Total Costs for Assisted Acquisition Agreements (Block 28)
must sum to this total.]	
31. Attachments (State or list attachments.)	
☐ Key project and/or acquisition milestones (Optional except for As	ssisted Acquisition Agreements)
	,
Other Attachments (Optional)	
Other Attachmonic (Optional)	
BILLING & PAYMENT I	INFORMATION
32. Payment Method (Check One) [Intra-governmental Payment an If IPAC is used, the payment method must agree with the IPAC Trading	
Requesting Agency Initiated IPAC Servicing Agency In	nitiated IPAC
☐ Credit Card ☐ Other – Explain other	er payment method and reasoning
33. Billing Frequency (Check One)	T-y
	ad by the Decreeting A DEFODE C 1
[An Invoice must be submitted by the Servicing Agency and accepted reimbursed (i.e., via IPAC transaction)]	ed by the Requesting Agency BEFORE funds are
Monthly Quarterly Other Billing Frequency (incl	lude explanation)
34. Payment Terms (Check One)	
7 days Uther Payment Terms (include explanation):	

IAA Number SPEI17C001		Servicing Agency's Agreement			
GT&C#	Order # Amendment/Mod #	Tracking Number (Optional)			
35. Funding Clauses/Inst	ructions (Optional) (State and/or list funding	ng clauses/instructions.)			
26 D.F. (61: I	Source time from Providents (Ontinent)				
Agency Name	formation for Products (Optional)				
Point of Contact (POC) Na	me & Title				
POC Email Address	Me & Title				
Delivery Address /Room N	lumber				
POC Telephone Number	idinoci				
Special Shipping Informati	on				
	APPROVALS AND CONTA	CT INFORMATION			
37. PROGRAM OFFICI					
		ervicing Agency, must ensure that the scope of work is cial may or may not be the Contracting Officer depending on			
each agency's IAA busine		or any arrangement of the contract of the cont			
	Requesting Agency	Servicing Agency			
Name	Katie Purucker	Allison Brigati			
Title	Director of Administration	Associate Administrator, OGP			
Telephone Number	(b) (6)				
Fax Number	(1-) (0)				
Email Address	(b) (b)	allison.brigati@gsa.gov			
SIGNATURE	(B)(6)	(b) (6)			
Date Signed	07-13-2017	7/13/17			
that the funds are accurate Agency Funding Official sig	ely cited and can be properly accounted for	per the purposes set forth in the Order. The Requesting Funding Official signs to start the work, and to bill, collect, lance with the agreement.			
	Requesting Agency	Servicing Agency			
Name	Katie Purucker	Stefan Grabas			
Title	Director of Administration	Funding Official			
Telephone Number	(b)(6)	(202) 501-0254			
Fax Number					
Email Address	(b) (6)	stefan.grabas@gsa.gov			
SIGNATURE	(b)(6)	MEIRA FRIED DirectUS a-US Government out-cleaneral Services Administration on-MERAFRED 09.23cd 1920/3000 100 11-47/2010/0013327 Development 2012/01/31 1031/2004.04/07			
Date Signed	07-13-2017	7/13/17			

IAA Number SPEI17C001XXX Servicing Agency's Agreement									
GT&C # Order # Amendment/Mod # Tracking Number (Optional)									
CONTACT INFORMATION									
FINANCE OFFICE Points of Contact (POCs)									
	ontact must ensure that the payment (Reque on are accurate and timely for this Order.	esting Agency), billing (Servicing Agency), and							
39.	Requesting Agency (Payment Office Kristin Savercool	e) Servicing Agency (Billing Office) General Services Administration							
Name Title	Budget Analyst	Financial Information & Operations Div							
Office Address									
Office Address	725 17th Street, NW Washington, DC 20503	USDA (FIOD-A) 2300 Main Street Kansas City, MO 64108							
Telephone Number	(b)(6)	(816) 926-4287							
Fax Number									
Email Address	(b) (6)	kc.generalfunds.billingrequests@gsa.gov							
Signature & Date (Optional)	(b)(6)								
	Contacts (POCs) (as determined by each TING Office Points of Contact (POCs).	Agency)							
	Requesting Agency	Servicing Agency							
Name		Valerie Whittington (Financial POC)							
Title		Program Analyst							
Office Address		1800 F Street, NW							
		Washington, DC 20405							
Telephone Number		(202) 501-3395							
Fax Number									
Email Address		valerie.whittington@gsa.gov							
Signature & Date (Optional)									
Name									
Title									
Office Address									
Telephone Number									
Fax Number									
Email Address									
Signature & Date (Optional)									
Name									
Title									
Office Address									
Telephone Number									
Fax Number									
Email Address									
Signature & Date (Optional)									

_ 000

_ 01

IAA Number SPEI17C001037

United States Government Interagency Agreement (IAA) – Agreement Between Federal Agencies

Order Requirements and Funding Information (Order) Section

IAA Number SPEI17C001037 _ 000 _ 01 Servicing Agency's Agreement									
GT&C#	GT&C # Order # Amendment/Mod # Tracking Number (Optional)								
	WIBOGF-OVFSFEIT/COUT								
PRIMARY ORGANIZATION/OFFICE INFORMATION									
24.	Requ	esting Agency		Servicing Age	ncy				
Primary Organization/Office Name	Office of the Vi	ce President		al Services Adminis of Governmentwide					
Responsible Organization/Office Address	725 17th Stree Washington, D			Street, NW ngton, DC 20405					
	ORDER/REQUIREMENTS INFORMATION								
New Modification (Mod) – List affected Order blocks being changed and explains the changes being made. For Example: for a performance period mod, state new performance period for this Order in Block 27. Fill out the Funding Modification Summary by Line (Block 26) if the mod involves adding, deleting or changing Funding for an Order Line. This is a zero dollars modification. This agreement adjusts accounting classification data for this customer order between OEP/OVP and GSA. □ Cancellation − Provide a brief explanation for Order cancellation and fill in the Performance Period End Date for the effective cancellation date.									
26. Funding Modification Summary by Line	Line #	Line #	Line #	Total of All Other Lines (attach funding details)	Total				
Original Line Funding	\$215,000.00	\$	\$	\$	\$215,000.00				
Cumulative Funding Changes From Prior Mods [addition (+) or reduction (-)]	\$	\$	\$	\$	\$ 0.00				
Funding Change for This Mod	\$0.00	\$	\$	\$	\$ 0.00				
TOTAL Modified Obligation	\$215,000.00	\$0.00	\$0.00	\$ 0.00	\$215,000.00				
Total Advance Amount (-)	\$	\$	\$	\$	\$0.00				
Net Modified Amount Due	\$ 215,000.00	\$0.00	\$0.00	\$ 0.00	\$215,000.00				
		1 10: 1		- 00.00.0	0.1.7				
27. Performance Period For a performance period mod, inset the start and end dates that reflect the new performance period.		Last Signatu MM-DD-Y		Date 09-30-2 MM-DD-Y					

IAA Number SPEI17C001037	- 000	_ 01	Servicing Agency's Agreement
GT&C#	Order#	Amendment/Mod #	Tracking Number (Optional) MBOGP-OVPSPEI17C001

28. Order Line/Funding Information							Line Number									
Requesting Agency Funding Information						Servicing Agency Funding Information										
ALC			11-0	11-03-0001					47-00-0016							
Component	SP	ATA	AID	BPOA	EPOA	A	MAIN	SUB	SP	ATA	AID	BPOA	E POA	A	MAIN	SUB
TAS Required by 10/1/2014			011	2016	2017		0037	000			047				4540	001
OR Current	TAS fo	rmat	I						47X4	1540.0	•					
BETC DISB							COLL									
Object Class	Code (Optional)														
BPN			0316	349358					964253686							
BPN + 4 (Opt	tional)															
Additional Ad Classification (Optional)			(b)	(4)												
Requesting A 09-30-20	gency 17	Funding	g Expi	ration D	ate			Rec	uestin 9-30-	g Age 2022	ncy Fu	nding C	ancellatio	on Da	te	
MM-DD-YY	YY							MN	1-DD-	YYYY	7					
Project Num	ber &		he Pre	esidenti	al Advis	sory	Comm	ssion	on Ele	ection	Integri	ty				
products/services, including the bona fide need for this Order.) Support activities consistent with the Presidential Executive Order on the Establishment of Presidential Advisory Commission on Election Integrity of May 11, 2017.							ntegrity									
North Americ						AIC	S) Num	` •							T	
Unit of Meas		nbursal	ole Lii	ie Costs				OR	OR Breakdown of Assisted Acquisition Line Cost: Contract Cost \$							
	ure	Unit l	Duine		Т-	4-1		-			\$					
Quantity		Unit	Price			tal		Sei	vicing							
1	\$0.00 \$ 0.00 O		Obl	igated	Total Cost	\$ 0.	00									
Overhead Fee	es & C	harges		\$ 0.	00			A	Advance for \$							
Total Line Ar	nount	Obligate	ed	\$ 0.00 Line (-)												
								Ne	t Total	Cost	\$ 0.	00				
A			Ass	Assisted Acquisition Servicing Fees Explanation												
Advance	Line A	Amount	(-)	\$ 0.	\$ 0.00											
Net Lin	ne Amo	ount Due	e	\$ 0.00												
Type of Service Requirements																
Severable Service Non-severable Service V Not Applicable																

			IAA Order					
IAA Number	A Number SPEI17C001037 _ 000			Servicing Agency's Agreement				
	GT&C#	Order#	Amendment/Mod #	Tracking Number (Optional) MBOGP-0VPSPEI17C001				
29. Advance	Information (Comple	te Block 29	if the Advance Paymen	nt for Products/Services was checked "Yes" on the GT&C.)				
Total Advan	ce Amount for the Or	rder \$	[All	Order Line advance amounts (Block 28) must sum to this total.]				
			g to SFFAS 7) (Identify and the Servicing Agency	the Revenue Recognition Methodology that will be used to y's revenue)				
Straight-l	ine – Provide amount	to be accrue	d \$	and Number of Months				
Accrual I	Per Work Completed –	- Identify the	accounting posting pe	riod:				
□ м	onthly per work compl	leted & invo	iced					
Ot	her – Explain other reg	gular period	(bimonthly, quarterly, ed if other than billed.	etc.) for posting accruals and how the accrual				
<u> </u>			ed if other than billed.					
[All Order Lin).00 for reimbursa	able agreements and Ne	et Total Costs for Assisted Acquisition Agreements (Block 28)				
must sum to t	ents (State or list attacl	hmanta)						
I —	•	•	(Ontional arount for A	ssisted Acquisition Agreements)				
L Key pro	gect and/or acquisition	1 Illifestolles	(Optional except for A	ssisted Acquisition Agreements)				
_								
Other Attachments (Optional)								
BILLING & PAYMENT INFORMATION								
				nd Collection (IPAC) is the Preferred Method.] g Partner Agreement (TPA).				
Reque	esting Agency Initiated	l IPAC	Servicing Agency I	nitiated IPAC				
Credit	Card		Other – Explain oth	ner payment method and reasoning				
33. Billing F	requency (Check One	:)						
[An Invoice 1	must be submitted by	the Servici	ng Agency and accept	ed by the Requesting Agency BEFORE funds are				

Other Billing Frequency (include explanation)

✓ Monthly

✓ 7 days

reimbursed (i.e., via IPAC transaction)]

34. Payment Terms (Check One)

Quarterly

Other Payment Terms (include explanation):

IAA Number SPEI17C001037	- 000	- 01	Servicing Agency's Agreement
GT&C#	Order#	Amendment/Mod #	Tracking Number (Optional) MBOGP-OVPSPEI17C00

35. Funding Clauses/Instructions (Optional) (State and/or list funding clauses/instructions.)						
J		,				
36. Delivery/Shipping	Information for Products (Optional)					
Agency Name						
Point of Contact (POC)	Name & Title					
POC Email Address						
Delivery Address /Room	n Number					
POC Telephone Number	r					
Special Shipping Inform	ation					
1 11 0						
	A PROPOSITAL CANDA CON	VEL CE DIFORMATION				
	APPROVALS AND COM	WTACT INFORMATION				
	CIALS as identified by the Requesting Agency and the fulfilled for this Order. The Program of	d Servicing Agency, must ensure that the scope of work is Official may or may not be the Contracting Officer depending on				
The Program Officials, properly defined and car	CIALS as identified by the Requesting Agency and the fulfilled for this Order. The Program of	d Servicing Agency, must ensure that the scope of work is				
The Program Officials, properly defined and car	CIALS as identified by the Requesting Agency and the fulfilled for this Order. The Program oness process.	d Servicing Agency, must ensure that the scope of work is Official may or may not be the Contracting Officer depending on				
The Program Officials, properly defined and car each agency's IAA busi	CIALS as identified by the Requesting Agency and the fulfilled for this Order. The Program oness process. Requesting Agency	d Servicing Agency, must ensure that the scope of work is Official may or may not be the Contracting Officer depending on Servicing Agency				
The Program Officials, properly defined and ca each agency's IAA busi Name	CIALS as identified by the Requesting Agency and the fulfilled for this Order. The Program oness process. Requesting Agency Katie Purucker	d Servicing Agency, must ensure that the scope of work is Official may or may not be the Contracting Officer depending on Servicing Agency Allison Brigati				
The Program Officials, properly defined and careach agency's IAA busi Name	CIALS as identified by the Requesting Agency and the fulfilled for this Order. The Program of the process. Requesting Agency Katie Purucker Director of Administration	d Servicing Agency, must ensure that the scope of work is Official may or may not be the Contracting Officer depending on Servicing Agency Allison Brigati				
The Program Officials, properly defined and careach agency's IAA busing Name Title Telephone Number	CIALS as identified by the Requesting Agency and the fulfilled for this Order. The Program of the process. Requesting Agency Katie Purucker Director of Administration	d Servicing Agency, must ensure that the scope of work is Official may or may not be the Contracting Officer depending on Servicing Agency Allison Brigati				
The Program Officials, properly defined and careach agency's IAA busing Name Title Telephone Number Fax Number	CIALS as identified by the Requesting Agency and the fulfilled for this Order. The Program of the process. Requesting Agency Katie Purucker Director of Administration	d Servicing Agency, must ensure that the scope of work is Official may or may not be the Contracting Officer depending on Servicing Agency Allison Brigati Associate Administrator, OGP				

38. FUNDING OFFICIALS - The Funds Approving Officials, as identified by the Requesting Agency and Servicing Agency, certify that the funds are accurately cited and can be properly accounted for per the purposes set forth in the Order. The Requesting Agency Funding Official signs to obligate funds. The Servicing Agency Funding Official signs to start the work, and to bill, collect, and properly account for funds from the Requesting Agency, in accordance with the agreement.

	Requesting Agency	Servicing Agency			
Name	Katie Purucker	Stefan Grabas			
Title	Director of Administration	Funding Official			
Telephone Number	(b)(6)	(202) 501-0254			
Fax Number					
Email Address	(b) (6)	stefan.grabas@gsa.gov			
SIGNATURE	(b)(6)	Digitally signed by STEFAN GRABAS Disc ords, evil 3. Government, on-Canneral Services Administration, on-STEFAN GRABAS, 0.9.23 2.19200300, 100.1.1= 7001002862578 Desc 2017.07.25 09313 4 00 00			
Date Signed	07-25-2017	07-25-2017			

IAA Number SPEI17C001037	- 000	- 01	Servicing Agency's Agreement
GT&C#	Order#	Amendment/Mod #	Tracking Number (Optional)

CONTACT INFORMATION FINANCE OFFICE Points of Contact (POCs) The finance office points of contact must ensure that the payment (Requesting Agency), billing (Servicing Agency), and advance/accounting information are accurate and timely for this Order. 39. Requesting Agency (Payment Office) Servicing Agency (Billing Office) Kristin Savercool General Services Administration Name Title **Budget Analyst** Financial Information & Operations Div Office Address 725 17th Street, NW USDA (FIOD-A) 2300 Main Street Washington, DC 20503 Kansas City, MO 64108 Telephone Number (816) 926-4287 Fax Number Email Address kc.generalfunds.billingrequests@gsa.gov Signature & Date (Optional) Distripupation NRS INSAMENDO District ordifficational confination on the exclusion www.mrs. Nationalcom 0.6 2002 000200 00 + 00 0000000 Dev 20 707 200230 0.000 40. ADDITIONAL Points of Contacts (POCs) (as determined by each Agency) This may include CONTRACTING Office Points of Contact (POCs). Requesting Agency Servicing Agency Name Valerie Whittington (Financial POC) Title Program Analyst Office Address 1800 F Street, NW Washington, DC 20405 Telephone Number (202) 501-3395 Fax Number Email Address valerie.whittington@gsa.gov Signature & Date (Optional) Name Title Office Address Telephone Number Fax Number Email Address Signature & Date (Optional) Name Title Office Address Telephone Number Fax Number Email Address Signature & Date (Optional)